DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Facility Information

Facility Name: SERVITE HOME (0009630)

Address: 8457 N SERVITE DR APT 102, MILWAUKEE, WI 53223

License Status: REGULAR

Licensed/Certified/Registered 09/06/2002

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095984 End Date: 11/08/2005 Type: ABBREVIATED Purpose: SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Complaint History

Date Complaint Received: 08/18/2005 Date Investigation Completed: 11/08/2005

Subject Area(s) Result SOD #

MEDICATIONS NOT SUBSTANTIATED

Date Complaint Received: 06/08/2005 Date Investigation Completed: 11/08/2005

Subject Area(s) Result SOD #

ABUSE NOT SUBSTANTIATED NUTRITION & FOOD SERVICES NOT SUBSTANTIATED

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